## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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HAMILTON, B 530 VIRGINIA R P.O. BOX 9133		EYNOLDS, P.	Note: A certificate of maining can only be used for domestic mainings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
CONCORD, MA 01742-9133 3/10/2005 SSESHE2 00000008 10008457					nela Sarno	(Depositor's name)
PA DEAL					Panela Sarus	
FC:1504	300.00 DP				3-7-05	(Date)
FC:8001  APPLICATION NO.	18.00 OP FILING DATE	FIRST NAMED INVEN		VENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/008,457 11/16/2001 TITLE OF INVENTION: SURGICAL INSTRUMENT		David L. Brock		rock	3300.1014-006	5179
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	03/21/2005
EXA	EXAMINER		IT·	CLASS-SUBCLASS	7	
PHILOGE	PHILOGENE, PEDRO			606-130000	_	
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unles recordation as set forth in (A) NAME OF ASSIGN endoVia Med	NEE ical, Inc. te assignee category or catego	tion form to fa Customer  E PRINTED ON Telow, no assignee of this form is NO  (B	2 registered pelisted, no nam THE PATENT (pelisted, no nam The PATENT (pelisted) The PAT	on the patent. If an assifiling an assignment.  (CITY and STATE OR C  Massachusett  at): Individual	If no name is 3  Ignee is identified below, the OUNTRY)	
4a. The following fee(s) are enclosed:  Issue Fee  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			Deposit Account Number			
a. Applicant claims	s (from status indicated above SMALL ENTITY status. See D is requested to apply the Issu Publication Fee (if required) v	37 CFR 1.27.			IALL ENTITY status. See 37 ( usly paid issue fee to the applic egistered attorney or agent; or	
Authorized Signature	Carolina	M Fle	Office.		3/7/05 on No. 45,566	
•••	ion is required by 37 CFR 1.3 lity is governed by 35 U.S.C. application form to the USPT is for reducing this burden, st ginia 22313-1450. DO NOT		n is required to o 1.14. This collect depending upon Chief Informati COMPLETED FO		y the public which is to file (at 2 minutes to complete, includ comments on the amount of the data Trademark Office, U.S. De SS. SEND TO: Commissione	

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